## MEDICAL SPECIALS SUMMARY RAMONA HERRERA

	HOSPITALS		
IMSS HOSPITAL Predio Canoas SN, 1 34070 Durango Dgo. Mexico (618) 811-9820	Dorador		
Date	Description	Amount	Area Total
			\$ -
HOSPITAL de la I Calle 5 de Febrero N Guillermina, 34270 Dgo. Mexico (618) 818-9541	No. 903 Durango		
Date	Description	Amount	Area Total
			-
AMITA ALEXIAN 800 Biesterfield Ros Elk Grove Village, I (847) 437-5500			
Date	Description	Amount	Area Total
09/14/18	Shoulder surgery - rotator cuff		
			\$ -

## PHYSICIANS

FRANCISCO ADRIAN CASTILLO NAVARRETE, M.D. (Trauma and Orth

Los Almamillos 509 Colinas Del Salito Durango, Dgo 34105 (618) 818-0384

Date	Description	Amount	Area Total

			\$ -
			Ψ
Glendale Heights I 113 W. Lake Street Bloomingdale, Illin (630) 894-8600	M.D. (Family Medicine) Healthcare Center ois 60108		
Date	Description	Amount	Area Total
			\$ -
			Ψ
Midwest Sports M 901 Biesterfield Ro Elk Grove Village, (847) 437-9889	EZ, M.D. (Orthopedic Surgery) edicine & Orthopedic Surgery ad, Suite 300 Illinois 60007		
Date	Description	Amount	Area Total
09/14/18	Shoulder surgery - rotator cuff		
			\$ -
			- Ψ
PARAG DOSHI, M 804 Woodfield Roa Schaumburg, Illinoi (847) 605-9500	<b>M.D. (Cardiology - related?)</b> d, Suite 300 s 60173		
Date	Description	Amount	Area Total
			\$ -
			-
			\$ -
			-
NAME Address City, State Zip Phone			
Date	Description	Amount	Area Total
	1		

	RADIOLOGY		
	RADIOLOGI		
BRIGHT LIGHTS 31 S. Arlington Heig Elk Grove Village, I (847) 616-2000 Date	MEDICAL - Ct. scan ghts Road flinois 60007  Description	Amount	Area Total
08/11/18	X-ray cervical spine	\$ 128.0	
08/11/18	CT head or brain w/o c	\$ 828.0	
00/11/10	er nead of ordin w/o e	Ψ 020.0	
			\$ 956.00
NAME			
Address City, State Zip Phone			
Date	Description	Amount	Area Total
			\$ -
	PHYSICAL THERA	PY	
HEALING REHAI 125 South Blooming Bloomingdale, Illino (847) 466-5420	B PHYSICAL THERAPY, S.C. gdale Road, Suite 5 is 60108		
Date	Description	Amount	Area Total
08/15/18		\$ 30.0	
08/17/18		\$ 30.0	00
			Φ (0.00
NAME Address			\$ 60.00
City, State Zip Phone			
Date	Description	Amount	Area Total
			\$ -

**TOTAL** \$ 1,016.00

updated: (4/4/18 mc; 4/16/19 mc)

Note: Listed above are the names of healthcare providers rendering treatment to plaintiff relative to injuries sustained in the occurrence which forms the basis of the present lawsuit. The dates and dollar amounts reflect bills in our possession at this time. Please refer to the medical records for additional dates of treatment and for the names of other individuals providing treatment with respect to each healthcare provider.

